								_					
Substitute for Porm PTO-875								D Application or Doctors 09/610,704 09 610 704					
CLAIMS AS FILED - P			ART I (Column 2)					SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR		NUMB	NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE
BASIC FEE  (7) CFR 1.15(4)						•			s	OR		\$	
	AL CLAIMS CFR LIG(I)	16	16 minus		20- •		0		×\$		OR	x \$	0
DND	EPENDENT CLAI	MS 2	minu	3= *		0			x		OR	×	0
MULTIPLE DEPENDENT CLADM PRESENT (27 CFR 1.16(4))									+		OR	+ _0_	0
If the difference in column I is less then zero, emer "0" in column 2									TOTAL		OR	TOTAL	6/00
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OR	OTHER TI	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (J7 CFR 1.16(c))	• a	Minus	••	20	-	22		×\$		OR	x \$ <u>50</u> =	1,100
	Independent (37 CFR 1.16(b))	• 4	Minus	***	3	-	1	П	× =		OR	x <u>200</u> =	200
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 GTR 1.15(4))								+/ <u>-</u>		OR	+_0-	0
(Column 1) (Column 2) (Column 3)								AE	TOTAL DIT. FEE		OR	TOTAL DDIT. FEE	\$1,300
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NI PRE	GHEST JMBER VIOUSLY ID FOR		SENT TRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEB
	Total (37 CFR 1.15(e))	.40	Minus	••	42	-	0		x \$		OR	x\$=	فر
	Independent (37 CFR 1.16(b))	· 4.	Minus	***	4	-	0	$\  \ $	×	/ .	OR	x=	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLADA (J7 GTR 1.16(4))								<u>,</u>		OR	+ _0_/	0
(Column 1) (Column 2) (Column 3)							ΑĒ	TOTAL DIT. PEE		OR	TOTAL DDIT. FEE	20	
AMENDMENT C	·	CLAIMS REMAINING AFTER AMENDMENT		NL PRE	OHEST JMBER VIOUSLY ID FOR		SENT TRA .		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(4))	•	Minus	•		.=	0		x\$=		OR	x\$=	. 0
	Independent (37 CFR 1.16(b))	•	Mimus	***		•	0		× •		OR	· — •	0
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))								+ <u> </u>	<u>.</u>	OR	+6-	0
* If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  ADDIT, FEE											OR	TOTAL DDIT. PEE	\$0
A	the "Highest Numb the "Highest Numb	er Previously Paid For er Previously Paid For Previously Paid For	ON THIS SPA	CE is less CE is less	than 20, coter than 3, coter ".	<b>3"</b> .	l in the are			hone 1	, M	wast. FGG	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, about the Sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.